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DECLARATION — Utility or Design Patent Application

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Address 407 Nashvi'lle AVE City New on leans State A ZP 115 Country	ESHINAT MASOC	DOLFAR		
Country O. S. A relephone 9478787 State 19478788 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or improsomment, or both, under 18 U.S.C. 1001 and that such willful false statements and the like so made are punishable by fine or improsomment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name SHAPT ANDOUGHAR Family Name or Surname Inventor's Signature State Country Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name State A zipt U.S.C. 2017 A country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name State State Country City State Country City State Country City State Country Country Country Country Country Country	2407 Nashvi	Ue AVE		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor. Given Name SHAPT WASOODHAD Family Name ASOODHAD (first and middle [if any]) Date		State C	L.A	71115
are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: Given Name A petition has been filed for this unsigned inventor	Country U.S.A Telep	50494	78787.	5419478788
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Mailing Address F Nash Ville AVE City ON ONLINE State LA ZIPTIIS Country NAME OF SECOND INVENTOR: Given Name Giren Name (first and middle [if any)) Inventor's Signature Residence: City State Country City Country		OODFAR	2	Date
City ON ON ONE State	Residence: City Offens	State 2.	Country	Citizenship
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Family Name or Surname Inventor's Signature Residence: City State Country Citizenship City Country Country Country Country Country	Malling Address 7 Nash Ville	e AVE		
Given Name (first and middle [if any]) Inventor's Signature Residence: City State Country Citizenship City State Zip Country	cm New orland	State 2A	ZIP71115	Country 5
Given Name (first and middle [if any]) Inventor's Signature Residence: City State Country Citizenship City State Zip Country	NAME OF SECOND INVENTOR:	A petition has been	filed for this unsigne	d inventor
Residence: City State Country Citizenship City State Zip Country		Family	Name //	
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City State ZIP Country	Residence: City	State	Country	Citizenship
County	Mailing Address	T	·	
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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	Health show					
As the below named	As the below named inventor(s), I/we declare that:					
This declaration is d	lirected to:					
	The attached application, or					
	Application No, filed on					
	as amended on(if applicable);					
I/we believe that I/w which a patent is so	re am/are the original and first inventor(s) of the subject matter which is claimed and for bught;					
	I and understand the contents of the above-identified application, including the claims, as nendment specifically referred to above;					
to me/us to be mapplications, mater	he duty to disclose to the United States Patent and Trademark Office all information known naterial to patentability as defined in 37 CFR 1.56, including for continuation-in-part ial information which became available between the filing date of the prior application and International filing date of the continuation-in-part application.					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.						
FULL NAME OF IN	VENTOR(S)					
Signature: ESHIM MASONIF AND of: USA						
Inventor two:						
Signature:	Citizen of:					
Inventor three:						
Signature:	Citizen of:					
Inventor four:						
Signature:	Citizen of:					

Additional inventors are being named on ____additional form(s) attached hereto.

Burden Hour Statement: This collection of Information is required by 35 U.S.C. 115 and 37 CFR 1.63. The Information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid QMB control number Attorney Docket Number **DECLARATION FOR UTILITY OR** First Named Invent r **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION **Application Number** (37 CFR 1.63) Filing Date Declaration Declaration Submitted after Initial Submitted Art Unit Filing (surcharge with Initial (37 ČFR 1.16 (e)) Filing **Examiner Name** required) As the below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: ESHIBTI M ew orleams L.A the specification of which is attached hereto OR as United States Application Number or PCT International was filed on (MM/DD/YYYY) (if applicable). and was amended on (MM/DD/YYYY) Application Number I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. Foreign Filing Date **Priority Certified Copy Attached?** Prior Foreign Application Country (MM/DD/YYYY) **Not Claimed** Number(s) NO

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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PTO/SB/028 (11-00)

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DECLARATION -- Supplemental Priority Data Sheet

Additional foreign app	lications:			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page ___ of ___

						
Name of Additional Joint Inventor, if	any:		A petition has	been filed for	this unsigned inv	rentor
Given Name (first and middle (if a	ny])		Fa	mily Name or	Sumame	, <u></u>
Inventor's Signature					Date	
Residence: City	State	С	ountry		Citizenship	
Mailing Address						
Mailing Address						
City	State		ZIP	Cou	ntry	·
Name of Additional Joint Inventor, if	any:		A petition has	been filed for	this unsigned inv	entor
Given Name (first and middle [if a	any])		Fa	amily Name o	r Sumame	•
Inventor's Signature					Date	
Residence: City	State		Country	· 	Citizenship	<u> </u>
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Mailing Address						
City	State	•	ZIP		ountry	
Name of Additional Joint Inventor, i					this unsigned inve	entor
Given Name (first and middle [if any])			Family Name or Surname			
				<u>-</u>		
inventor's Signature	···				Date	
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